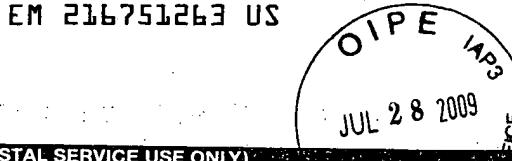


EM 216751263 US



Mailing Label
Label 11-F, April 2004



UNITED STATES POSTAL SERVICE®

Post Office To Addressee**ORIGIN (POSTAL SERVICE USE ONLY)**

PO ZIP Code	Day of Delivery	Postage
	<input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del. Day	\$
Date Accepted	Scheduled Date of Delivery	Return Receipt Fee
Mo. Day Year	Month Day	\$
Time Accepted	Scheduled Time of Delivery	COD Fee Insurance Fee
□ AM	<input type="checkbox"/> Noon <input type="checkbox"/> 3 PM	\$ \$
□ PM	Military	Total Postage & Fees
Flat Rate <input type="checkbox"/> or Weight	<input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	\$
Ibs. ozs.	Int'l Alpha Country Code	Acceptance Emp. Initials

CUSTOMER USE ONLY**METHOD OF PAYMENT:**Express Mail Corporate Acct. No. **X926624****DELIVERY (POSTAL USE ONLY)**

Delivery Attempt	Time	<input type="checkbox"/> AM	Employee Signature
Mo. Day		<input type="checkbox"/> PM	
Delivery Attempt	Time	<input type="checkbox"/> AM	Employee Signature
Mo. Day		<input type="checkbox"/> PM	
Delivery Date	Time	<input type="checkbox"/> AM	Employee Signature
Mo. Day		<input type="checkbox"/> PM	

WAIVER OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is void if waiver of signature is requested. I wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and I authorize that delivery employee's signature constitutes valid proof of delivery.

NO DELIVERY Weekend Holiday

Customer Signature

Federal Agency Acct. No. or
Postal Service Acct. No.**FROM: (PLEASE PRINT)**PHONE **949 724 1255**

RUSSO & DUCKWORTH
9090 IRVINE CENTER DR
IRVINE CA 92618-4658

277-P-32-US Scott
Issue FEE & Resp 2 ntc 2 file
corrected papers

Federal Agency Acct. No. or
Postal Service Acct. No.

TO: (PLEASE PRINT)

PHONE _____

Mail Stop Issue Fee
P.o. Box 1450
Alexandria, VA VA 22313-1450

FOR PICKUP OR TRACKING: Visit **WWW.usps.com** or Call 1-800-222-1811

42/ 200

F:02 I:

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No. 9012 Pickup/receipt card, 9-02

PTO: Please stamp and return.
 Drawing resp 2 ntc 2 file corrected.
 Fee Issue & Check \$755.00
 Resp. to OA
 Power of Att.
 Appeal Brief
 Notice of Appeal
 Assignment
 Filing Date
 New Application
 Serial/Patent No.
 hereon confirms the date the following was received.
The date stamp of the Patent & Trademark Office

Docket No. **277-B-32-US SCOTT**

Date